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<b>DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)</b>  <input checked="" type="checkbox"/> Declaration Submitted with Initial Filing      OR <input type="checkbox"/> Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)	<b>Attorney Docket Number</b>	J-3876
	<b>First Named Inventor</b>	Kenneth J. Welch
	<b>COMPLETE IF KNOWN</b>	
	<b>Application Number</b>	
	<b>Filing Date</b>	January 15, 2004
	<b>Art Unit</b>	
	<b>Examiner Name</b>	

**I hereby declare that:**

Each inventor's residence, mailing address, and citizenship are as stated below next to their name.

I believe the inventor(s) named below to be the original and first inventor(s) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

VOLATILE RELEASING SUBSTRATES AND METHODS FOR PREPARING THEM

(Title of the Invention)

the specification of which

☒ is attached hereto

OR

☐ was filed on (MM/DD/YYYY)  as United States Application Number or PCT International

Application Number  and was amended on (MM/DD/YYYY)  (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.


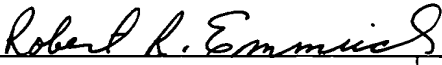
I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

## DECLARATION — Utility or Design Patent Application

Direct all correspondence to: <input checked="" type="checkbox"/> Customer Number <span style="border: 1px solid black; padding: 2px 20px;">28165</span> OR <input checked="" type="checkbox"/> Correspondence address below			
Name David J. Houser, Esq.			
Address S.C. Johnson & Son, Inc.			
Address 1525 Howe Street			
City Racine		State Wisconsin	ZIP 53403
Country U.S.A.	Telephone 262-260-2000		Fax
<p>I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.</p>			
NAME OF SOLE OR FIRST INVENTOR :		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) Kenneth J.		Family Name Welch or Surname	
Inventor's Signature 		Date 8 Jan 04	
Residence: City Racine	State WI	Country U.S.A.	Citizenship US
Mailing Address 141 Oregon Street			
Mailing Address			
City Racine,	State Wisconsin	ZIP 53405	Country USA
NAME OF SECOND INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) Robert R.		Family Name Emmrich or Surname	
Inventor's Signature 		Date 1-12-2004	
Residence: City Racine	State WI	Country USA	Citizenship US
Mailing Address 6340 Douglas Avenue			
Mailing Address			
City Racine	State Wisconsin	ZIP 53402	Country USA
<input type="checkbox"/> Additional inventors are being named on the ____ supplemental sheet(s) PTO/SB/02A or 02LR attached hereto.			

Please type a plus sign (+) inside this box → ☐

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## DECLARATION

**ADDITIONAL INVENTOR(S)**  
**Supplemental Sheet**  
Page 3 of 3

<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Michael J.		Aulozzi	
Inventor's Signature <i>Michael J. Aulozzi</i>		Date <i>1/12/2004</i>	
Residence: City	Racine	State	WI
Country	USA	Citizenship	US
Mailing Address 5725 Brookhaven Drive			
Mailing Address			
City	Racine	State	Wisconsin
ZIP	53406	Country	USA
<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Inventor's Signature		Date	
Residence: City		State	
Country		Citizenship	
Mailing Address			
Mailing Address			
City		State	
ZIP		Country	
<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Inventor's Signature		Date	
Residence: City		State	
Country		Citizenship	
Mailing Address			
Mailing Address			
City		State	
ZIP		Country	

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# **POWER OF ATTORNEY and CORRESPONDENCE ADDRESS INDICATION FORM**

<b>Application Number</b>	
<b>Filing Date</b>	January 15, 2004
<b>First Named Inventor</b>	Kenneth J. Welch
<b>Title</b>	Volatile Releasing Substrates
<b>Art Unit</b>	
<b>Examiner Name</b>	
<b>Attorney Docket Number</b>	J-3876

I hereby appoint:



Practitioners associated with the Customer Number:

28165

OR



Practitioner(s) named below:

Name	Registration Number
Carl R. Schwartz	29,437
Richard T. Roche	38,599
Steven J. Wietrzny	44,402
Zhibin Ren, Esq.	47,897

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

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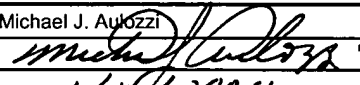
I am the:



Applicant/Inventor.

Assignee of record of the entire interest. See 37 CFR 3.71.  
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

## **SIGNATURE of Applicant or Assignee of Record**

Name	Michael J. Aulozzi		
Signature			
Date	1/15/2004	Telephone	

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below\*.



\*Total of \_\_\_\_\_ forms are submitted.

This collection of information is required by 37 CFR 1.31 and 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

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Firm or  
Individual Name

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State

Zip

Country

Telephone

Fax

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## SIGNATURE of Applicant or Assignee of Record

Name	Robert R. Emmrich		
Signature	<i>Robert R. Emmrich</i>		
Date	1-12-2004	Telephone	

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below\*.



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<b>Examiner Name</b>	
<b>Attorney Docket Number</b>	J-3876

I hereby appoint:

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28165

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☐ The address associated with Customer Number:

OR

☐ Firm or Individual Name

Address

Address

City

State

Zip

Country

Telephone

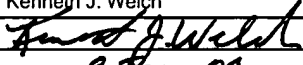
Fax

I am the:

☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.  
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

## SIGNATURE of Applicant or Assignee of Record

Name	Kenneth J. Welch		
Signature			
Date	0 Jan 04	Telephone	

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